## **Grimes Parks & Recreation Department**

Telephone: (515) 986-2143 Fax: (515) 986-3846

www.grimesiowa.gov



## **Adult Rock Climbing for Beginners Class**

## Program Description:

**NEW!** This INTRO TO CLIMBING AND MOVEMENT class is taught by the "Climb Iowa" Staff here in Grimes. It is two classes in one. During the first class, you will get an introduction to the gym and the safety procedures for the main climbing/bouldering areas. They will teach you how to put on a climbing harness correctly, how to tie into that harness using the figure eight follow-through knot, and how to belay a climber. The last three classes will focus on climbing movement. During these three 2-hour classes, you will learn how to climb more efficiently by working on your balance on the wall. These last three weeks will dive deep into the movement of climbing so you can become a better climber. This 4-week class includes all rental gear, a month long membership to Climb Iowa during these sessions, and 8-hours of instruction.

**Who:** For Adults at least 18 years and older

**Where:** Climb Iowa's Facility on NW 54<sup>th</sup> Ave in Grimes

Dates: Mondays, February 16 – March 13 (4 classes)

**Times:** 7:00pm – 9:00pm (Min. 2/Max. 6.)

**Questions:** Contact Brett Barber, Grimes Parks & Recreation Director by Email at <a href="mailto:bbarber@ci.grimes.ia.us">bbarber@ci.grimes.ia.us</a> or by phone at 986-2143.

**To Register:** Register online at <a href="www.grimesiowa.gov">www.grimesiowa.gov</a>, or you can stop into the Grimes Rec Office and pay with cash/check to City of Grimes.

**Cost:** \$70.00 per participant (Normally costs \$325 if purchased separately.)

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2009 "Adult Rock Climbi	ng for Be	ginners Class	" Registration Form	
PARTICIPANT'S NAME:				
STREET ADDRESS:		CITY:	ZIP CODE:	
EMAIL:	PHONE:			
Add me to the Grimes Rec Email List:	Yes	No	Already on the List	
Cost is \$70 per participant.				

## **Release and Indemnification Agreement:**

I hereby request that you accept my application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance, I hereby release the City of Grimes, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event I am injured in an accident that occurs while I am participating in this program. I further agree to indemnify the City of Grimes, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage while I participate in this particular activity. I will also allow pictures of myself during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

Signature of Parent or Guardian Date

Grimes Community Complex ~ 410 S. Main St. in Grimes